



**RECREATION, PARKS AND OPEN SPACE  
FACILITY USE APPLICATION (NOT A PERMIT)  
RECREATION FACILITIES**

**501 BOUSH STREET  
NORFOLK, VIRGINIA 23510  
OFFICE: (757) 441-2400 FAX: (757) 441-5423**

**RECREATION FACILITIES**

**FOR OFFICE USE ONLY:**

Fee Attached \_\_\_\_\_  
Paid (Receipt #) \_\_\_\_\_  
Resident \_\_\_\_\_ Yes \_\_\_\_\_ No  
Approved \_\_\_\_\_ Yes \_\_\_\_\_ No  
Permit Number \_\_\_\_\_

Facility Requested \_\_\_\_\_ Activity \_\_\_\_\_

Days of Week \_\_\_\_\_ Date \_\_\_\_\_ Hours \_\_\_\_\_  
(Use additional sheet if more than one day.) FROM TO

ESTIMATED NUMBER OF PARTICIPANTS/SPECTATORS \_\_\_\_\_ 0-39 \_\_\_\_\_ 40-199 \_\_\_\_\_ 200+

RESPONSIBLE PERSON (Must be on site during permit hrs.) Phone \_\_\_\_\_  
PRINT NAME Work Home

EMAIL \_\_\_\_\_

ORGANIZATION (if applicable) \_\_\_\_\_

APPLICANT'S ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

**AREA REQUESTED:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Small Conference Room  
Large Conference Room  
Multi-purpose Room  
Gym

**SPECIAL ACCOMMODATIONS:**

**Circle One**

Does your event include carnival games? Yes No  
Does your event include a bounce house? Yes No  
Does your event include pony rides? Yes No  
Does your event include displays? Yes No

**DESCRIBE SECURITY TO BE PROVIDED BY APPLICANT** (attach security contract and insurance certificate upon request)

THE PERSON(S) TO WHOM A PERMIT IS ISSUED SHALL BE LIABLE FOR ANY LOSS, DAMAGE, OR INJURY SUSTAINED BY ANY PERSON BY REASON OF THE NEGLIGENCE OF THE PERSON OR PERSONS TO WHOM SUCH A PERMIT SHALL HAVE BEEN ISSUED. THE DIRECTOR MAY REQUIRE SUCH PUBLIC LIABILITY INSURANCE AS HE DEEMS TO BE IN THE BEST INTEREST OF THE CITY.

I have read the Department of Recreation, Parks & Open Space Recreation Facility Rental Regulations and agree and accept their terms.

APPLICANT'S NAME (PLEASE PRINT) \_\_\_\_\_ DATE \_\_\_\_\_

APPLICANT'S SIGNATURE \_\_\_\_\_

RECREATION SUPERVISOR/FACILITY MANAGER \_\_\_\_\_ DATE \_\_\_\_\_  
DIVISION HEAD \_\_\_\_\_ DATE \_\_\_\_\_  
SUPERINTENDENT OF RECREATION & YOUTH SERVICES \_\_\_\_\_ DATE \_\_\_\_\_

**NOTE:**

**Any discrepancy between this application and the actual event will be cause for future denial of facility use, and additional fees will be assessed.**